| | | | | | | | | | | Ąţ | oplication o | or Dock | et Number | |
|--|--|-------------------------------|--|-------|-------------|--------------------------------------|------------------|------------|-----------------|--------------|------------------------|---------------------|---------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004 | | | | | | | | | | | | | ,329 | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMA TYP | | ENTITY | OR | OTHER SMALL | | |
| FOR | | | NUMBER FILED | | | NUMBER EXTRA | | | RATE | | FEE | | RATE | FEE |
| BASIC FEE | | | | | | | | | | | 395.00 | OR | | 790.00 |
| TOTAL CLAIMS | | | 37 | minus | 20 = | * | | | x\$11 | = | | OR | x\$22= | |
| INDEPENDENT CLAIMS | | | 5 minus 3 = | | | • 2 | | | x41= | = | | OR | x82= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +135 | = | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter *0" in column 2 | | | | | | n 2 | | | TOTA | L | | OR | TOTAL | |
| D |) 1-24-06 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | · . | SMA | \ L L | ENTITY | OR | | R THAN ENTITY |
| AMENDMENT A | | CLAI REMAI AFT AMEND | INING ER | | NI PRE | GHEST JMBER VIOUSLY JD FOR | PRESENT EXTRA | | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | .3 | <u>† </u> | Minus | ** £ | 70 | = 125 | | x\$11: | = | | OR | x\$22= | ÷ |
| | Independent | • | 5 | Minus | *** | 10 | = 8 | | x41= | = | | OR | x ₈ 2= | , |
| ٧ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135 | = | · | OR | +270= | |
| | (Column 1) (Column 2) (Column 3) | | | | | | A | TOT. | - | | OR | TOTAL ADDIT. FEE | | |
| | Below motherm or done or | CLA | <u> </u> | | · | olumn 2) | (Column 3) | 7 1 | | <u> </u> | | 1 | | · ; |
| AMENDMENT B | | REMA | INING ER DMENT | | · NI PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | 3 | RATE | | ADDI- TIONAL FEE | | REMAIN! RATE:: | B 2. |
| | Total | * | | Minus | ** | | = | | x\$11 | = | | OR: | x\$22= | |
| | Independent | * | | Minus | *** | | = | | x41= | = | | OR | x82= | |
| V | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135 | = | | OR | +270= | |
| | (Column 1) (Column 2) (Column 3 | | | | | | (Column 3) | , _ | TOT ADDIT. F | | | OR | TOTAL ADDIT. FEE | |
| AMENDMENT C | | CLA REMA AFT AMEND | INING ER | | NI PRE | GHEST UMBER VIOUSLY VID FOR | PRESENT EXTRA | | RATE | = | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | | Minus | ** | | = | | x\$11 | = | | OR | x\$22= | |
| | Independent | * | | Minus | *** | | = | | x41: | = | • | OR | x82= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135 | = | | OR | +270= | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL TOTAL ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | | |